								ŀ	Application or Docket Number			
PATENT APPLICATION FEE DETERMINATION RECO								D 10/825766				
Effective October 1, 2003								- DAGO DELLA				
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL TYPE	ENTITY	OR	OTHER	
TOTAL CLAIMS			25					RATE	FEE]	RATE	FEE
FOR .			NUMBER FILED		NUMBER EXTRA			BASIC FI	385.00	OR	BASIC FEE	770.00
TOTAL CHARGEABLE CLAIMS			25 minus 20∞		٠ ٢			XS 9=	45	OR	X\$18=	
INDEPENDENT CLAIMS			2_m	inus 3 =	•			X43=	•	OR	X86=	
ML	JUTIPLE DEPEN	NDENT CLAIM P					+145=		OR	+290=	·	
* If the difference in column 1 is less than zero, enter "0" in column 2							•	TOTAL	430	OR	TOTAL	
(// , CLAIMS AS AMENDED - PART II									71-		OTHER	THAN
1/16/04 (Column 1) (Column 2) (Column 3)								SMALL	ENTITY	OR	SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		NUMI PREVIO	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	. 24	Minus	-2)	• —		X\$ 9=		OR	X\$18=	
	Independent	• 2	Minus		3	•	ı	X43=		OR	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=		OR	+290=	
	-1 , 1						ſ	TOTA		OR	TOTAL	
7/19/04(Column 1) (Column 2) (Column 3)								DOIT. FEI	E	J • • •	ADDIT. FEE	
AMENDMENT B	Mt Di-	CLAIMS		HIGH	5 T		ſ		ADDI-	1		ADDI-
		REMAINING AFTER AMENDMENT		PREVIO	USLY	PRESENT EXTRA	l	RATE	TIONAL FEE		RATE	TIONAL FEE
	Total	. (30		•	I	X\$ 9=		OR	X\$18=	
	independent		Nunus		<u> </u>	<u> </u>	lſ	X43=		OR	X86=	
	FIRST PRESE	NTATION OF MI	LIPLE DE	ENDENI	CLAIM			+145=		ÖR	+290=	
	5 2-05									OR	TOTAL ADDIT.FEE	
(Column 1) (Column 2) (Column 3)												
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADCI- TIONAL FEE
	Total	• 24	Minus		5	• (I	X\$ 9=	·	OR	X\$18=	
	Independent	• 3	Minus	(3			X43=			X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							71.0-	-	OR		
			+145=		OR	+290=	•					
	* If the entry in column 1 is less than the entry in column 2, water 'U' in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." **ADDIT. FEE ***OFFICE TRIPLES Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."											
*	if the "Highest Nus The "Highest Nuss	niber Previously Pe ber Previously Pei	id For IN THE I For (Total o	5 SPACE in Independe	Heas the (14) is the	n 3, enter '3.' bighest number	r foun	d in the a	ppropriete ba	i in col	umn 1.	